



STATE OF DELAWARE
OFFICE OF MANAGEMENT AND BUDGET
OFFICE OF FLEET SERVICES

EXEMPTION FROM "STATE OWNED"

Covers Period: January 1, 2013 through December 31, 2013

INCOMPLETE FORMS CANNOT BE PROCESSED

NOTE: All State-Owned motor vehicles shall bear a license plate which carries the notation "STATE OWNED." Exemptions may be approved by the Director of the Office of Management and Budget, per 29, Del. C. §7107 that reads "All state-owned motor vehicles shall bear on the rear license plates issued by the Division of Motor Vehicles the notation "STATE OWNED." All state-owned boats shall bear prominent identification on the rear thereof identifying such boats as state-owned. The automobile used by the Governor, and law-enforcement vehicles and vessels of State agency law enforcement personnel covered under the provisions of the Delaware Council on Policy Training, are exempted from the requirements of this section. Other exemptions from this section must be approved by the Director of the Office of Management and Budget."

DRIVER'S FULL NAME AND TITLE:

NAME: _____

TITLE: _____

EMPLOYEE I.D. NUMBER:

DRIVER'S BUSINESS E-MAIL ADDRESS:

VEHICLE HOUSING LOCATION:

Is the Driver a member of the Delaware Council on
Police Training as defined in 11 Del. C. §8401(5)

☐ YES

☐ NO

☐ Check box that you have read the attached Fleet Services Policy No. VO-16, Registration/Identification

Vehicle License Number: _____

Vehicle Year/Make/Model:

REQUESTING DEPARTMENT AGENCY:

CONTACT PERSON & BUSINESS E-MAIL ADDRESS:

CONTACT PHONE NUMBER: _____

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Describe the nature of investigative/surveillance/enforcement activities and the impact of a confidential tag on the integrity of that investigation:

Describe any employee and/or vehicle/property security concerns:

REVIEWED BY REQUESTING CABINET SECRETARY/AGENCY HEAD OR SUPERINTENDENT

_____	_____
Requesting Cabinet Secretary/Agency Head	Date

(PRINT NAME)

FLEET SERVICES USE ONLY:

☐ APPROVED ☐ DECLINED

EFFECTIVE DATE (IF APPLICABLE):

Director, Office of Management and Budget

Date

Return completed form to:
Office of Fleet Services, 100 Enterprise Place, Suite 4, Dover DE 19904